



From: Siciliano, Lorraine
Sent: Friday, February 02, 2018 11:28 AM
To: Siciliano, Lorraine
Subject: VT Medicaid EHRIP Update 02/02/18: Your Frequently Asked Questions!

To All Vermont Medicaid EHR Incentive Program participants:

The latest MAPIR system upgrade was completed as of 1/5/18, and the EHRIP Team is standing by and ready to assist with the application submission process. As you navigate the Medicaid Portal to the “*Connect to MAPIR*” link and work on provider attestations, you may encounter error messages, missing links, MAPIR alerts, or general question on how to enter data correctly. Below is a round-up of **frequently-asked questions** that will be updated periodically.

Why can't I see a provider in the drop-down list in MAPIR to select their provider ID and start an application?

The EHRIP Team can research the provider's NPI to confirm that they are registered to receive Medicaid EHRIP payments with your organization. If they are, but you still cannot find the provider ID in MAPIR, the issue is usually with the **Trading Partner ID association**. You can confirm and resolve that by following the steps we have listed at our Troubleshooting webpage:

<http://healthdata.vermont.gov/ehrip/Help/Access#2>

For general assistance with Trading Partner ID questions, you can contact Medicaid Provider Services: (802) 879-4450 Option #3, or email vtedicoordinator@dx.com

We are trying to attest for a provider, but we see in the CMS Registration and Attestation site that he is registered for Medicare, not Medicaid. The CMS R&A is not allowing me to switch the program affiliation to Medicaid. Can we do this?

No. The last year for a provider to switch from the Medicare to Medicaid EHRIP was before the application deadline for submissions for Program Year 2014.

We have a provider who is failing a Meaningful Use measure threshold. Patient volume and all other Objectives and Measures are being met. Do we complete an application in MAPIR anyway?

No. Meaningful Use is an all-or-nothing construct. If the provider does not meet the threshold for one of the objectives or measures, they will not meet the requirements for Meaningful Use, and they will not submit an application in MAPIR for an EHR Incentive Payment for the Program Year. They will be eligible to resume participation in the next Program Year.

Really? But they were so close! This provider is failing just one MU measure by less than 1%.

It is important to check to see if the measure in question is an [*objective that allows actions outside the 90-day EHR Reporting Period*](#). For those providers challenged to meet revised, higher thresholds for certain Meaningful Use measures in Program Year 2017, remember that the data on certain actions can be included in the numerator even if the action occurred before, during or after the 90-day EHR Reporting Period (but within the calendar year). Each objective's specification sheet lists the information under the 'Additional Information' section of any objective that allows this. Click here for a complete list of Modified Meaningful Use Stage 2 and Stage 3 Objectives with links to the CMS Specification Sheets:

<http://healthdata.vermont.gov/sites/healthdata/files/pdfs/EHRIP/ActionsAllowableOutside90DayReportingPeriod.pdf>

One of our eligible providers left our employment and went to another practice in August 2017. The provider's new practice has taken him on as an Eligible Professional. Can we still submit a MAPIR application for him for Program Year 2017?

No. Eligibility for the EHR Incentive Program is provider-based, not practice-based. An Eligible Professional who leaves a practice retains their eligibility to participate in the EHRIP with their new practice or jurisdiction. Unless there is a specific authorized agreement between the provider and your practice for a Program Year 2017 EHRIP payment, you will not submit an EHRIP application in MAPIR on behalf of this provider.

When we checked the status of one of our providers, she was required to report under the MIPS Quality Payment Program. Upon checking more recently, she was *not* required to report under MIPS. Could that have changed?

Yes. MIPS is administered by CMS [Medicare](#) Quality Payment Program initiative, and reporting requirement determinations have to do with Medicare billing levels, among many other criteria. We advise folks to follow up with the MIPS Support Center regarding eligibility, policy and technical assistance: <https://qpp.cms.gov/about/help-and-support>

Are you able to determine if a provider coming to us from another state is eligible to receive a Medicaid EHR Incentive payment? We searched the CMS R&A site by name and NPI and could not find his record.

Yes, we are able to research his NPI, and this provider is eligible to receive a Medicaid EHRIP payment, but his Registration and Attestation information at the CMS site must be updated. He is accomplishing a State-to-State switch, and you will need to update his information at the CMS R&A site to align with your practice. If you need assistance to switch his affiliation from his old practice, you can contact the CMS R&A Helpdesk:

CMS Registration and Attestation Helpdesk

The CMS Registration and Attestation [website](#) maintains The Electronic Health Record (EHR) Information Center to assist providers with all of your registration and attestation system inquiries.

EHR Information Center Hours of Operation:

7:30 a.m. – 6:30 p.m. (Central Time) Monday through Friday, except federal holidays.

1-888-734-6433* (primary number) *(press option 1) or 888-734-6563 (TTY number)

One of our providers is scheduled to receive his third Medicaid EHRIP payment. However, he has been out since June, so we will not attest for him for Program Year 2017. Can his year three payment be next year?

Yes, Eligible Professionals (but not Eligible Hospitals) may continue to skip years in the Medicaid EHRIP. If this provider will not attest for Program Year 2017, he can resume participation and apply for a third-year payment in Program Year 2018.

I have completed a provider's attestation, and submitted it in MAPIR. But I then discovered an error in the data I entered. I can't access the application to correct it. What should I do?

The EHRIP Team can put the application back into "Incomplete" status so you can correct the data and resubmit the application. Just send an email to: ahs.dvhaEHRIP@vermont.gov

Your recent email update reminded us we are in Program Year 2018 now. When it is time to report on 2018 requirements, will we still be using a 90-day reporting period?

In Program Year 2018, all providers will once again be attesting to a minimum 90-day EHR Reporting Period for the **Meaningful Use Objectives and Measures**.

The Program Year 2018 Reporting Period for **Clinical Quality Measures** has NOT been finalized. Further rulemaking will be required to establish the 2018 CQM reporting period, and we will keep our program participants updated with that information when it becomes available.

Stage 3 of Meaningful Use will be required for Program Year 2018, right?

No, all providers will continue to have the option to attest to Modified-Meaningful Use Stage 2 Objectives and Measures once again in 2018. Stage 3 will not be required. Providers who *elect* to attest to Stage 3 must have upgraded to a 2015 CEHRT that supports the criteria.

I'm logged into the Vermont Medicaid Portal, but I cannot see the "Connect to MAPIR" link. I was just working with a provider's application yesterday. What is happening?

A system issue prevented the link from showing. Sometimes a glitch happens, and the first we know about a system failure is your email reporting trouble. One recent morning, we received several mails within a couple of hours all reporting the same issue of being unable to see the "Connect to MAPIR" link. We were able to follow up with our technical partners and the issue was resolved. Keep sending us messages regarding any technical issues or problems you may have!

If there are no reported system issues, and you still cannot see the "Connect to MAPIR" link, please follow these steps to resolve:

<http://healthdata.vermont.gov/ehrip/Help/Access#2>

If you are aware of anyone who would like to receive our EHRIP email updates, or if you would like to be removed from this distribution list, please forward the updated information to ahs.dvhaEHRIP@vermont.gov.

Don't hesitate to contact the Vermont Medicaid EHRIP Team with any questions, and be sure to check out the [Vermont Medicaid EHRIP website](#) for important information about the program.

Thank you,
Lorraine

Lorraine Siciliano

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